Allocation of funds (or Health and FanJh Welfare Facilities In Rural and Urban Areas

2257. SHRI SANJAY DALM1A: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) whether the rural areas have been treated at par with the urban areas in regard to allocation of funds for health and family welfare facilities during the last three years;

(b) if so, the details thereof; and

(c) if not. the steps that are being taken to remove this imbalance ?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI B. SHAN-KARANAND) : (a) to (c) Central investments in the national disease control programmes and family welfare programmes have a strong focus on rural u-cas. The health infrastructure comprising secondary/ tertiary level hospitals serves as referral units for primary level rural health infrastructure comprising Sub-centres, Primary Health Centres and Community Health Centres established in rural areas.

Efforts So brine down birth rata

2258. DR. NAUNIHAL SINGH: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the number of children borne every year to a number of million couples in the reproductive age group 15—44 yean ;

(b) whether it is a fact that National Family Health Survey.was conducted by Government recently; if so, what are the findings thereof;

(c) whether it is a fact that couoles in all parts of the country want less children than the three to four that they have ; if so, whether any study has been conducted in this regard ; and

(d) whether it is a fact that Government are planning new strategies to bring down the birth rate from the current 28 (per 1000 population) to 20 in the next 10 to 15 years; if so, what are the details thereof ?

THE MINISTER OF STATE IN THE MINISTRY OF FIEALTH AND FAMILY WELFARE (DR. C. SILVERA): (a) According to the Registrar General of India, in 1992, there were 28.2 million live births and 147.6 million married women in the reproductive age groups (15—49 years).

(b) Yes, Sir. Some findings of the survey are given at the annexed statement. *(See* below).

gel Based ou the survey reports available for Uttar Pradesh, 11.4* of the couples with 3 living children and 38.0% of the couples with 4 living children desired to have less number of children.

(d) The National Health Policy (1983) aims to bring down birth rate to a level of 21 (per 1000 population) by 2000 AD, but according to the VIII Plan document, this level could be achieved by 2011—16.

Statement

(1) The Total Fertility Rate in the country has dropped to 3.4.

(2; Hie knowledge of at least one family planning method is 96%. But only 40.6% of the currently married are using any method of contraception.

(.5) The acceptance of family planning increases with literacy and education.

(4) Most of the contraceptive requirements are supplied by the public sector Government programme (79%).

(5) The Infant Mortality Rate was 79 per thousand live births for the period 1988—92. This corresponds to the SRS estimates.

Persons suffering from AIDS and Tuberculosis

2259. SHRI ISH DUTT YADAV : Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) whether it is a fact that there is a steady rise in the Tuberculosis cases in the country and that in majority of the cases reported, persons affected with AIDS were detected;

(b) if so, what, according to the assess ment made by Government is the percent age of rise in the tuberculosis cases in the country during the last one year and the estimated number of cases in which the patients were also suffering from AIDS: and

(c) what are the factors identified lor the rise of tuberculosis cases and the measures taken by Government to check it ?

THE MINISTER Oi HEALTH AND FAMILY WELFARE (SHRI B. SHAN-KARANAND) : (a) and (b) There are no significant changes in the incidence level of I.B. Of the 905 AIDS cases reported till November, 1994, 52.8% are reported to have been suffering from T.B.

(c) Mal-nutrition, poverty, illiteracy and over-crowding are some of the spread of disease. Though, there has been no

significant change in the Incidence of TJJ., mortality and severity of morbidity have declined.

Central Assistance to states affected with Malaria

2260. SHRIMAT1 KAMLA SINHA :
DR. BAPU KALDATE:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) whether it is a fact that malaria has gripped certain parts of the country including Rajasthan claiming many lives ;

(b) if so. which states in the country. according to the study if any, conducted by Government or on the basis of ihe reports received from the States, are the areas infested with malaria;

(c) what is the nature and extent of central assistance given to the State Governments to control it as against the assistance asked by the State Governments; and

(d) what country-wide strategy has been formulated by Government to eradicate it V

THE MINIS! ER OF HEALTH AND FAMILY WELFARE (SHRI B. SHANKARANAND): (a) and (b) The outbreak of Malaria in Rajasthan, Manipur and Nngaland resulted in increase in cases and deaths in certain districts of these States, in addition, the States of Arunaciial Pradesh, Assam, Jammu & Kashmir, Kar-nuiaka and Tripura have reported higher incidence of Malaria during this year as compared to the previous year.

(c) The Malaria programme is implemented on a 50:50 cost sharing basis between the Centre and the States, The Central Government supplies specific insecticides and drugs as per approved pattern. Some States request for extra supplies of insecticides and drugs which are provided keeping in view the emergent needs.

(d) The steps taken include :—

— active surveillance and monitoring.

— early case detection and prompt treatment.

— residual insecticidal spray.

— recurrent anti-larval measures.

— community participation and health education.

— bio-environmental measures.

— making drugs available at village level.

Caws of T.B. amongst AIDS patient*

2261. DR. BAPU KALDATE:
SHRIMATI KAMLA SINHA:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that tuberculosis cases in the country have been steadily rising and that of the AIDS cases reported, majority of the affected persons are suffer ing from tuberculosis;

(b) if so, what according to the study, if any, is the percentage of rise in the tuberculosis cases in the country and the percentage of T.B. cases detected out of the reported AIDS cases in a year;

(c) whether it is also a fact that the AIDS Control Programme is yet to become operational in certain States in the country; and

(d) if so, what are the details thereof stating the steps taken by the Government in this regard ?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI B. SHANKARANAND): (a) and (b) There are no significant changes in the incidence level of T.B. Of all the AIDS cases reported so far, 52.8% have been found to be suffering from T.B.

(c) and (d) National AIDS Control Programme has been under implementation throughout the country since September, 1992. The strategies of the programme consist of generation of awareness about HIV/AIDS in high risk behaviour and general public, control of STDs, Blood safety and rational use of blood & blood products, diagnosis and clinical management of HIV/AIDS cases.

Sterilization Cases in Maharashtra

2262. SHRI GOVINDRAO ADIK : Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) what is the number of family planning centres separately for rural and urban areas in Maharashtra;

(b) what is the number of persons sterilized every year separately in rural and urban areas of Maharashtra; and

(c) what is the target fixed for steriliza tion for the year 1994 separately for rural and urban areas and how many have been sterilized against this target?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (DR. C. SILVERA): (a) The number of Family Welfare Centres are:—